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Substitute for form 1449/PTO <div style="text-align: center; font-weight: bold; font-size: 1.2em;"> INFORMATION DISCLOSURE STATEMENT BY APPLICANT </div> <div style="text-align: center; font-style: italic; font-size: 0.8em;"> (Use as many sheets as necessary) </div>		<div style="text-align: center; font-weight: bold; font-size: 1.1em;"> Complete if Known </div> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td>09/892,350</td> </tr> <tr> <td>Filing Date</td> <td>June 26, 2001</td> </tr> <tr> <td>First Named Inventor</td> <td>Ewing, Carrel W.</td> </tr> <tr> <td>Art Unit</td> <td>2152</td> </tr> <tr> <td>Examiner Name</td> <td>CHANKONG, DOHM</td> </tr> <tr> <td>Attorney Docket Number</td> <td>57058.0017</td> </tr> </table>		Application Number	09/892,350	Filing Date	June 26, 2001	First Named Inventor	Ewing, Carrel W.	Art Unit	2152	Examiner Name	CHANKONG, DOHM	Attorney Docket Number	57058.0017
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Examiner Signature	/Dohm Chankong/ (06/24/2010)	Date Considered	
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